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Cuckfield Urban District Council.

ANNUAL REPORT

OF THE

Medical Officer of Health

For the Year 1947.

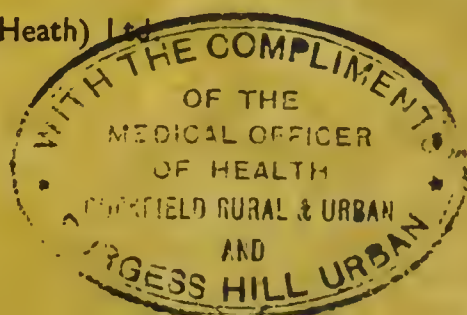
BY

WILLIAM B. STOTT,

L.R.C.P. & S. (Edin.), D.P.H. (Camb.).

Charles Clarke (Haywards Heath) Ltd.

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REPORT

OF

The Medical Officer of Health.

To the Chairman and Members of the Cuckfield Urban District Council.

I have the honour to submit my Annual Report for the year 1947.

The Crude Death Rate is 12.62 as compared with 13.16 for the previous year and with 12.0 for England and Wales.

The Infantile Mortality Rate is 32.37 as compared with 41 for England and Wales.

No deaths occurred from Typhoid Fever, Scarlet Fever, Diphtheria or Whooping Cough.

POLIOMYELITIS

This district suffered severely from the epidemic of poliomyelitis which swept the country during the second half of the year. There were 8 cases notified, 6 being children and two adults. The ages of the children were 15 months, 5 years, 7 years, 12 years and two at 15 years, so it was very far from being a disease of infants. The notification rate for the district was 53 per 100,000, as compared with 18 for England and Wales, the incidence therefore being three times that of the country as a whole. The majority of the patients had the disease in a severe form, two dying within 24 hours of removal to hospital; one is still confined to bed with extensive paralysis, three have still considerable paralysis and the remaining two, who had only slight paralysis, have made complete recoveries.

At the beginning of the outbreak a letter was sent to the general practitioners practising in the district giving a summary of the main symptoms and offering to see doubtful cases with them.

DIPHTHERIA IMMUNISATION

Full details of the scheme for persuading parents to have their children immunised against diphtheria and methods adopted were given in my 1946 Report, and as there have been no changes in procedure it is not proposed to cover the same ground again. Briefly, children are immunised at nine months, a Schick test being carried out three months after, thus ensuring immunity. A re-inforcing dose is given at the age of five when the child enters school, and a Schick test is done at 10 years of age.

In the 1-5 years of age group out of 883 children 869 were immunised—a percentage of 98. In the 5-15 years of age group out of 2,493 children 2,446 were immunised—a percentage of 98. (See table on page 8).

During the year 248 children were immunised, 600 were Schick tested and 149 received a re-inforcing injection. It is interesting to note, that of the children who were tested at 10 years of age, the majority of whom had been immunised many years previously, only 13 per cent. were Schick positive. This means that the procedure adopted in this district in the past, namely, immunisation with testing at infancy and re-testing at five years of age, ensures that a high percentage of the school children, at any rate up to 10 years of age, have a high degree of protection against diphtheria.

I am frequently asked what has been the incidence of diphtheria in this district since immunisation has been carried out. At the outbreak of war in 1939 over 90 per cent. of the school children had been immunised but only a small percentage of the one-to-fives. Shortly after the evacuation of London children to this district a number of cases of diphtheria began to occur, 12 cases being notified up to the end of the year. Five of these were in Cuckfield, and these seemed to be linked with an outbreak that was occurring in the rural district in the immediate vicinity. This outbreak was caused by a very virulent type of organism. By the end of 1939 approximately 90 per cent. of the children from one year upwards had been immunised, and as the percentage has never at any time fallen below this figure we now have experience of diphtheria over a period of eight years in a highly immunised child population.

The following is a summary of the cases of diphtheria that have occurred from 1940-47 inclusive :—

1940 two adults

1941 one child, evacuee from London and non-immunised, and one adult

1942 no case occurred

1943 two children who had been immunised and three adults (the two children and two of the adults all occurred in one household)

1944 no case occurred

1945 no case occurred

1946 one child who had been immunised in 1940

1947 no case occurred

The total number of cases therefore for the eight years was 10—an average of just over one case per year. This gives the low notification rate of .07 per year, which is considerably lower than the average for the country as a whole over the past eight years.

If the children in the district are divided into two groups, immunised and non-immunised, three cases occurred in the 95 per cent. immunised group and one child in the five per cent. non-immunised group.

Can immunisation be given the credit for the elimination of diphtheria from this district? I believe it can. Although the opponents of immunisation—they are not so voluble as they used to be—could probably find some other reason why the district has been free from diphtheria.

In my Report for 1945 mention was made of the commencement of a scheme for the testing and immunising of expectant mothers against diphtheria in order to find out if the child could be protected in this way during his first year.

There were 123 expectant mothers tested at the fifth month of pregnancy, 84 being positive, or susceptible to diphtheria, and 39 negative. Those found to be positive were immunised by three doses of T.A.F. In addition, 545 mothers were tested following the birth of the child, 319 being positive and 226 negative.

Fifty-four infants whose mothers had been successfully immunised or who were Schick negative were tested—16 at 6-9 months of age and 38 at 10-12 months. Of the former only two were found to be protected and of the latter only four. *The number of tested infants, although small, is sufficient to show that the majority of children do not inherit sufficient immunity from their mothers.*

All the testing and test reading throughout the area has been carried out by Dr. H. L. Duke, Deputy Medical Officer of Health, and he also gave the majority of the inoculations. It is mainly due to his efforts and those of Miss F. M. Dean, Immunisation Clerk, that the scheme runs so smoothly and efficiently.

SCABIES

The number of cases notified during the year was 26, which shows a considerable reduction from previous years.

MILK SUPPLY

It is interesting to note that of the 13 dairy farms in this district seven have tuberculin tested herds; in 1938 only two herds were tuberculin tested. The ideal is for all milk to be derived from tuberculin tested herds, as it is not only free from tuberculosis but is of a high degree of bacterial purity. It is hoped, therefore, that the other six producers will see their way to change over to tuberculin tested milk in the near future.

There would appear to be two reasons for the increase of tuberculin tested herds, one being the desire of the farmer to have a healthy herd and the other being the demand by the public for tuberculin tested milk, the producer changing over to meet the demand. It was known that the consumption of tuberculin tested and pasteurised milk had been increasing during recent years, so in order to find out the extent of the increase a survey of the types of milk consumed in this urban district has recently been carried out. A similar survey was carried out in 1936, and the following table shows the great change which has taken place since that date.

Daily Amount of Milk Consumed (gallons)

			1936			1947	
Ordinary	..	..	961	87%	..	411	29%
Pasteurised	..	..	88	8%	..	473	33%
Tuberculin Tested	..	..	53	5%	..	529	38%
Total			1,102	100%	..	1,413	100%

Compared with 1936, tuberculin tested milk shows a ten-fold increase, with pasteurised milk showing nearly a six-fold increase.

These results demonstrate an enlightened public opinion in this district in that a safe and clean milk is being demanded by the public.

Another interesting comparison between 1936 and 1947 is that in the former year as much as 25 per cent. of all the milk retailed was delivered loose, whereas now this practice has ceased, all milk being delivered in bottles. In my 1936 Report, in commenting on the delivery of loose milk as being unhygienic, I concluded by saying "I trust, therefore, that in the near future the retailers in this district will discontinue delivering loose milk to their customers." They have now done so, and I take this opportunity of paying

tribute to their achievement and to their efforts in retailing clean milk in the district, every retailer employing steam as a means of sterilising bottles and utensils.

As the consumption of ordinary milk is known to cause non-pulmonary tuberculosis in children owing to a proportion of such milk containing tubercle bacilli, I have scrutinised the notifications since 1934. It was found that in the twelve years from 1934 to 1945 inclusive 25 children were notified as suffering from non-pulmonary tuberculosis, an average of two per year, whereas in 1946 there was only one case, and she was probably infected by the mother, who was suffering from pulmonary tuberculosis; in 1947 one case occurred.

The numbers are statistically insufficient from which to draw definite conclusions, but they appear to be significant in view of the large change-over to the consumption of tuberculin tested and pasteurised milk.

It is pleasing to report that all the schools in the district are supplied with pasteurised milk.

ICE-CREAM

The Ice-Cream (Heat Treatment) Regulations, 1947, prescribing a number of requirements to be observed in the manufacture of ice-cream intended for sale, came into force on the 1st May, 1947.

The object of the Regulations is to safeguard the consumer from the risk of infection from the consumption of ice-cream, the outbreak of typhoid fever at Aberystwyth in the summer of 1946 having focused attention on the dangers arising from consumption of this commodity.

There is no doubt that the Regulations are a distinct advance on previous legislation in the matter of the protection of the public, but in my view they do not go far enough in that direction. It is regretted, for instance, that a clause was not inserted making it compulsory for ice-cream sold from barrows and vehicles to be wrapped, the wrapping having previously been done at the place of manufacture. Many firms are already adopting this practice, some on their own accord, and others on the advice from the public health department, and it is only a matter of time before it becomes universal. Legislation in this country always seems to lag behind public opinion. Another omission was the absence of a bacteriological standard to which ice-cream should comply. The Minister, in the circular sent with the Regulations (69/47), stated he was advised that no tests exist which were sufficiently accurate to justify them being made statutory. Opinion, however, is divided on this matter, and my experience, limited as it is, is that reliable firms can produce an ice-cream which when sampled invariably has a count of under 100,000 bacteria per m.l., and absence of *b. coli* in 1/100 of a m.l. This is the standard adopted in this district, and although it has no legal force the firms endeavour to conform to it.

It is recommended in the circular that a trial be given by local authorities to a modified methylene blue test, and in this district, as in the Cuckfield Rural and Burgess Hill Urban Districts, samples have been submitted to this test in addition to the plate count and coliform test. The recommendation for the interpretation of the methylene blue test is that samples which fall in grades 1 and 2 be regarded as satisfactory and those in grades 3 and 4 as unsatisfactory. Up to now 145 samples have been tested in this way, 128 having counts of under 100,000, absence of *b. coli* and passed the 4½ hours methylene blue test (grade 1), while 17 failed the first two tests and fell into grade 2 with the methylene blue test. Had we relied solely on the methylene blue test all the samples taken would have been regarded as

being satisfactory, and I am not prepared to admit, much as I should like to, that the standard of purity of ice-cream as sold in this district is 100 per cent. satisfactory. There does appear, however, to be correlation between the two tests on the one hand and the methylene blue test on the other, but the latter should be made more stringent—results below grade 1 being regarded as unsatisfactory.

I prefer for the present to rely on the count and coliform test, but propose to give an extended trial to the methylene blue test.

There are no manufacturers of ice-cream in this district, all vendors obtaining their supplies from London or the coastal towns. At all the retail premises proper washing and cleansing facilities have been provided—sinks with hot and cold water laid on. Similarly, in the case of the motor-vans from which ice-cream is sold calor gas apparatus for the provision of hot water has been provided in each van.

FOOD PREPARING AND CATERING ESTABLISHMENTS

Many visits of inspection were paid to food preparing and catering establishments, particular attention being given to the cleanliness of the kitchens, the w.c. and washing facilities for the staff, the personal cleanliness of the staff, in particular the washing of hands after using the w.c., and the facilities available and methods employed for washing and sterilisation of utensils. Owing to the increase in the number of food infections that have occurred in recent years, due in most cases to the food being infected by a food handler, it was thought that talks to catering staffs would educate them to take more care in the preparation of food.

It was considered that the best method would be for the talks to be given at individual premises in the early afternoon, and all proprietors and managers when approached welcomed the idea. I gave the first talk on what the food infections are, how they are caused, stressing the human factor, the foods liable to cause infection, and how infection can be prevented. This was followed by a second talk by your Senior Sanitary Inspector on the practical aspects of handling of food and hygiene in the kitchen. These talks have been very well received by both management and staff, and there has been a noticeable improvement in methods in the kitchens.

PUBLIC WATER SUPPLY

Complaints began to be received by the department in the late autumn from householders that the water supply was very discoloured, which on investigation was found to be due to brown vegetable-like filaments. The Engineer to the Water Board stated that a sample had been sent to the laboratory, and it was reported to contain algal growths called *crenothrix polyspora*. The cause was apparently due to a defect in the sand filters, allowing the spores of this alga to pass through, with consequent growth in the dead-ends of certain sections of the pipes. I arranged for a specimen of the deposit to be sent to the Zoological Department of the British Museum, and the Curator confirmed that the algal growths were harmless and that with attention to the filters and treatment with copper sulphate the trouble would disappear.

The Board took immediate steps to deal with the situation, including the flushing out of the mains, dosage with copper sulphate and renewal of the sand filters. This treatment resulted in a considerable improvement, but recurrences were reported in certain sections of the mains for some months.

I was appointed to, and am at present serving on, a Committee set up by the Royal College of Physicians to investigate the prevention and management of rheumatic heart disorders.

I am indebted to Mr. Staynes, Senior Sanitary Inspector, for his help and co-operation in the work of the department, and for his assistance in compiling this Report, and to the other members of the Staff, and in particular to Miss Everson, my Chief Clerk.

I should like to take this opportunity of expressing my appreciation of the consideration, support and assistance I have received from the Chairman and Members of the Public Health Committee.

I have the honour to be, Ladies and Gentlemen,

Your obedient Servant,

W. B. STOTT,

Medical Officer of Health.

**TABLE SHOWING PERCENTAGE OF CHILDREN IMMUNISED
IN SCHOOLS**

Name of School	Number on Roll	Number Immunised	Percentage
St. Wilfrid's (Infants) Primary C. of E. 	149	148	99
HaywardsHeathCountyModern	458	452	99
Lindfield Primary Council ..	318	313	99
Cuckfield Primary C. of E. ..	254	249	98
St. Wilfrid's (Junior) Primary C. of E. 	348	342	98
	1,527	1,504	98
Not yet at school or outside area at school 	111	111	100
14 - 15 	43	43	100
Private Schools 	812	788	97
	2,493	2,446	98

STATISTICS AND SOCIAL CONDITIONS OF THE AREA

Summary of Statistics for the years :

	1945,	1946,	1947.
Area of District in acres	3,912	3,912	3,912
Population estimated to middle of year ..	14,260	14,820	15,130
Rateable Value	£142,327	£144,961	£142,222
Sum represented by a Penny Rate	£576/3/5	£570/19/4	£560
Density of Population (persons per acre)..	3.64	3.79	3.87
Number of Houses	4,175	4,281	4,393
Birth Rate per 1,000 population	15.00	16.60	18.37
Death Rate per 1,000 population	12.27	13.16	12.62
Infantile Mortality Rate	23.36	24.37	32.37

CAUSES OF DEATH IN CUCKFIELD URBAN DISTRICT.

CAUSE OF DEATH.	MALES.	FEMALES.
1. Typhoid and Paratyphoid Fevers	—	—
2. Cerebro-Spinal Fever	—	—
3. Scarlet Fever	—	—
4. Whooping Cough	—	—
5. Diphtheria	—	—
6. Tuberculosis of Respiratory System	2	—
7. Other forms of Tuberculosis	—	—
8. Syphilitic Diseases	—	—
9. Influenza	2	—
10. Measles	1	—
11. Acute Poliomyelitis and Polio-encephalitis ..	1	—
12. Acute Inf. Encephalitis	—	—
13. Cancer of B. Cav. and Oesoph. (male), Uterus (female)	—	5
14. Cancer of Stomach and Duodenum	2	1
15. Cancer of Breast	—	2
16. Cancer of all other sites	16	9
17. Diabetes	1	—
18. Intra. Cran. Vasc. Lesions	9	19
19. Heart Disease	21	40
20. Other Diseases of Circulatory System ..	4	7
21. Bronchitis	2	3
22. Pneumonia	9	8
23. Other Respiratory Diseases	—	1
24. Ulcer of Stomach or Duodenum	—	—
25. Diarrhoea under 2 years	—	—
26. Appendicitis	—	1
27. Other Digestive Diseases	—	1
28. Nephritis	—	2
29. Puerperal and Post Abor. Sepsis	—	—
30. Other Maternal Causes	—	—
31. Premature Birth	1	3
32. Con. Mal. Birth Inj. Infant Dis.	—	1
33. Suicide	2	2
34. Road Traffic Accidents	1	—
35. Other Violent Causes	1	—
36. All other Causes	3	8
Totals	78	113

BIRTH RATE, CIVILIAN DEATH RATE AND ANNUAL ANALYSIS OF MORTALITY
During the Year 1947 (Provisional Figures).

	RATE PER 1,000 CIVILIAN POPULATION.		ANNUAL DEATH RATE PER 1,000 CIVILIAN POPULATION.								RATE PER 1,000 LIVE BIRTHS.	
	Live Births	Still Births	All Causes	Typhoid and Para-typoid Fever	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Small-pox	Measles	Diarrhoea and Enteritis (Under 2 years)	Total Deaths under 1 year
England and Wales	20.5	0.50	12.0	0.00	0.00	0.02	0.01	0.09	0.00	0.01	5.8	41
126 County Boroughs and Great Towns, including London ..	23.3	0.62	13.0	0.00	0.00	0.03	0.01	0.09	0.00	0.02	8.0	47
148 Smaller Towns (Resident Pop- ulation 25,000 to 50,000 at 1931 Census	22.2	0.54	11.9	0.00	0.00	0.02	0.01	0.08	0.00	0.02	3.7	36
London	22.7	0.49	12.8	0.00	0.00	0.02	0.01	0.08	—	0.01	4.8	37
Cuckfield Urban	18.37	0.20	12.62	—	—	—	—	0.13	—	0.07	—	32.37

Puerperal Others. Total.

The Maternal Mortality Rates for England and Wales are as follows :—Per 1,000 Total Births 0.16 0.85 1.01

The Maternal Mortality Rates for the Cuckfield Urban District are as follows Nil Nil Nil

BIRTHS AND DEATHS

Births and Birth Rate

The following table shows the Births registered for the year 1947 :—

			<i>Male</i>		<i>Female</i>		<i>Total</i>
Legitimate	..	..	133	..	134	..	267
Illegitimate	..	..	5	..	6	..	11
			<hr/>		<hr/>		<hr/>
Total	..	..	138	..	140	..	278

This gives a rate of 18.37 per 1,000 population.

			<i>Male</i>		<i>Female</i>		<i>Total</i>
Total Stillbirths	..		2	..	1	..	3
Legitimate	..		2	..	1	..	3
Illegitimate	..		—	..	—	..	—

Deaths and Death Rate

The following table shows the Deaths registered for the year 1947 :—

<i>Male</i>		<i>Female</i>		<i>Total</i>
78	..	113	..	191

This gives a mortality rate of 12.62 per 1,000 population.

SANITARY SUPERVISION OF THE AREA

*Slaughterhouses	..	..	..	..	..	338
Foodshops	..	..	..	..	..	580
Bakehouses	..	..	..	..	..	88
Cowsheds	..	..	..	..	..	142
Dairies	..	..	..	..	..	133
Restaurant Kitchens	..	..	..	..	..	66
Ice-Cream Premises	..	..	..	..	..	74
Factories	..	..	..	..	..	75
Primary Public Health Acts		..	..	..	..	307
Re-Inspections	..	..	..	..	..	725
Infectious Diseases	..	..	..	..	..	11
Disinfections	..	..	..	..	..	5
† Rats and Mice	..	..	..	..	..	1,970
Disinfestations	..	..	..	..	..	9
Inadequately Housed	..	..	..	..	..	501
Maintenance of Requisitioned Houses		..	..	..	..	675
Control of Building Works		..	..	..	..	836
Caravans	..	..	..	..	..	17
Shops Act, 1934	..	..	..	..	..	1
Schools	..	..	..	..	..	2
Disposal of Household Goods	..	..	..	..	..	93
Miscellaneous	..	..	..	..	..	79
						<hr/>
						6,727
						<hr/>

* Approximately one-third of these visits were made by the Sanitary Inspectors of the adjoining rural districts.

† This figure includes visits made by the Council's rodent operative.

COMPLAINTS

One hundred and twenty-five complaints were received and dealt with ; forty-eight of these were regarding rats and mice.

STATUTORY NOTICES

Section 75 Public Health Act, 1936

Served	11
Complied with by Owners	12

Section 93 Public Health Act, 1936

Served	3
Complied with by Owners	3

PRELIMINARY NOTICES

Served	151
Complied with by Owners	129
Voluntary Works Supervised	111
(under Building Licence and W.B.A. Certificate)	

INFESTATIONS

All infestations were dealt with by liquid insecticide.

The following premises were disinfested during the year :—

Fleas	1
Bugs	4
Ants	1
Flies	6
Wasps	1
Woodworm	1
	14
	—

HOUSING

Systematic house-to-house inspections has not yet been re-commenced.

During the year 96 families were re-housed by the Council, 34 in pre-fabricated houses, 40 in new permanent houses, 4 in requisitioned houses converted to flats and 18 in two huts each converted into 9 two-roomed flats.

The recording of applicants for council houses and the investigation of all applications, together with the preparation of reports to the Housing Tenancies Sub-Committee, was throughout the year carried out by the senior sanitary inspector and his staff. Towards the end of the year a housing manager was appointed, and the work transferred from the senior sanitary inspector's office.

EMERGENCY HOUSING ACCOMMODATION

The conversion of huts and requisitioned properties has remained the duty of the senior sanitary inspector. During 1947 two huts and one house were converted to 22 flats at a cost of £3,116 8s. 8d.

One condemned cottagc was let on Licence under the Defence (General) Regulations, 1939, after the execution of certain works.

One new licence to use a moveable dwelling was issued and two existing licences to occupy moveable dwellings were renewed during the year. These are all caravans of the motor trailer type and will cease to be occupied for their present purpose when the owners are allowed to build houses.

FACTORIES

1. INSPECTIONS for purposes of provisions as to health.

Premises	Number on Register	Number of		
		In-spections	Written notices	Occupiers prosecuted
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	33	78	4	Nil
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	61	141	5	Nil
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers premises)	—	—	—	—
Totals	94	219	9	Nil

2. CASES IN WHICH DEFECTS WERE FOUND

Particulars	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	To H.M. Inspector	By H.M. Inspector	
Want of cleanliness (S.1)	9	9	—	—	—
Overcrowding (S.2) ..	—	—	—	—	—
Unreasonable temperature (S.3) ..	—	—	—	—	—
Inadequate ventilation (S.4)	—	—	—	—	—
Ineffective drainage of floors (S.6) ..	—	—	—	—	—
Sanitary Conveniences (S.7)—					
(a) Insufficient ..	—	—	—	—	—
(b) Unsuitable or defective ..	2	3	—	1	—
(c) Not separate for sexes	—	—	—	—	—
Other offences against the Act (not including offences relating to Outwork) ..	—	—	—	—	—
Totals ..	11	12	—	1	—

OUTWORK

(Sections 110 and 111)

Nature of Work	No. of out-workers in August list required by Sect. 110 (1) (c)	No. of cases of default in sending lists to the Council	No. of prosecutions for failure to supply lists	No. of instances of work in unwholesome premises	Notices served	Prosecutions
Wearing apparel—						
Making, etc. ..	2	—	—	—	—	—
Cleaning and washing ..	—	—	—	—	—	—

Sections 15 - 45—Nil.

Means of Escape in case of Fire

Prior to the war, Certificates of Adequate Means of Escape in case of fire were issued in respect of eight factories. A yearly inspection specifically in relation to means of escape is made, and the certificates are endorsed for a further twelve months. Certificates in respect of six more factories were issued during the year.

INSPECTION AND SUPERVISION OF FOOD

Meat Inspection

There are two slaughterhouses in use in the district, one a Government selected slaughterhouse, the other at a large institution. Three men were licensed to slaughter animals during the year.

During the year 4,835 animals were slaughtered at the Government slaughterhouse and all were inspected. There were 338 visits to the slaughterhouse, and 1,027 condemnations involving 18,210½lb. of meat and offals were made.

Animals Slaughtered

Bulls	..	..	..	..	39
Bullocks	..	..	..	..	422
Cows	..	..	..	..	380
Heifers	..	..	..	..	467
Calves	..	..	..	..	1,396
Sheep	..	..	..	..	2,050
Pigs	..	..	..	..	81
					<hr/> 4,835 <hr/>

Carcases of Animals Inspected and Condemned

	Cattle exc. Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed	928	380	1,396	2,050	81
Number inspected ..	928	380	1,396	2,050	81
All Diseases except Tuberculosis: Whole carcasses condemned	0	2	1	3	1
Carcases of which some part or organ was condemned	397	134	6	256	7
Percentage of the number inspected affected with disease other than Tuberculosis	42.78	35.78	0.50	12.63	9.87
Tuberculosis only: Whole carcasses condemned ..	2	7	3	—	2
Carcases of which some part or organ was condemned	85	114	—	—	3
Percentage of the number inspected affected with Tuberculosis	9.37	31.57	0.21	—	6.17

The above table shows that of 380 cows slaughtered, 121 were affected with tuberculosis in some degree, whilst 257 were in some way diseased. The percentage of cows killed affected with tuberculosis (31.57) is less than last year, the figures for 1940, 1941, 1942, 1943, 1944, 1945 and 1946 being 47, 55, 52, 65, 56, 49 and 46 respectively.

Of all cattle killed (1,308) 208 were affected with tuberculosis in some degree.

MILK SUPPLY

REGISTRATION

Tuberculin Tested Milk

Producers	..	..	..	..	..	4
Producer Retailers	..	..	..	..	..	1
Retailers (including T.T. Certified)	..	..	..	..	..	9

Accredited Milk

Producers	..	..	..	..	..	2
Producer Retailers	..	..	..	..	..	2

Ordinary Milk

Producers	..	..	..	..	..	3
Producer Retailers	..	..	..	..	..	1
Retailers	..	..	..	..	..	11

Pasteurised Milk

Dealer's Licence	..	..	..	..	..	1
Supplementary Licences	..	..	..	..	..	2

Note.—There is no pasteurising plant within the District.

The above registrations are held by the 12 producers and 10 retailers in the area.

SAMPLING

The standard adopted for milk other than pasteurised milk is that samples which pass the methylene blue test have counts of under 200,000 per m.l., and absence of coliform organisms in 1/100th m.l. are considered to be satisfactory.

Tuberculin Tested Milk

Fifty-nine samples (45 from farms and 14 by retail) of locally produced tuberculin tested milk were taken and fifty-eight satisfied all three tests. The one unsatisfactory sample was from a retailer, and failed the methylene blue test and contained B. Coli in 1/100th m.l.

Eight samples of tuberculin tested milk from outside the district were obtained and 6 were satisfactory, the two unsatisfactory samples having B. Coli in 1/100th m.l.

Accredited Milk

Thirty-nine samples of locally produced accredited milk were taken at the place of production and all were satisfactory.

Ordinary Milk

Twenty-five samples of locally produced ordinary milk were obtained and all satisfied all three tests.

Sixty-three samples of ordinary milk were obtained by retail and 62 were satisfactory, the unsatisfactory sample failing the methylene blue test and containing B. Coli in 1/100th m.l.

Note.—Of the 193 samples of untreated milk tested during the year 97 per cent were satisfactory.

Pasteurised Milk

Thirty-one samples of pasteurised milk were obtained by retail and thirty were satisfactory.

Biological Examination

Thirty-two samples of milk (14 produced locally and 18 from outside) were submitted for biological examination and all gave negative results.

COWSHEDS AND DAIRIES

All cowsheds and dairies in the District are equipped with steam sterilizing plant. One has changed hands during the year and the cowshed and dairy were completely reconstructed with a view to the establishment of a tuberculin tested herd.

Of the 13 farms in the area, seven now produce tuberculin tested milk, 4 accredited, and 2 ordinary, as compared with 2 producers of tuberculin tested milk, 5 of accredited and 8 ordinary milk in 1938.

WATER SUPPLY

- (i) The water for the whole of the urban district is supplied by the Mid-Sussex Joint Water Board. This was satisfactory in quality and quantity with the exception of the occurrence of algal growths as reported on page 7.
Monthly samples were taken for bacteriological analysis and all were reported as being satisfactory.
- (ii) The Board carries out monthly bacteriological examination of the raw water and all were satisfactory. The water was chlorinated after filtration.
- (iii) The supply is not liable to plumbo-solvent action.
- (iv) There was no evidence of the supply being contaminated.
- (v) Every house in the district is provided with a piped supply direct to the house.

DESTRUCTION OF RATS AND MICE

There were 48 complaints regarding rat infestation during 1947, and these led to the inspection of 371 premises, of which 159 were found to be infested. The Council employ a rat operative trained under the Ministry of Food's Scheme, and this man worked at 159 premises. Two hundred and eleven dead rats were found, and it is estimated that 1,337 rats were destroyed. During August and September a re-test of the Council's sewers was made, manholes not previously tested being used. Infestations were found at five of the 129 manholes tested, and these were treated with poison and cleared.

INFESTATIONS—FLIES

During September complaints of infestation of roof spaces by immense numbers of flies were received in respect of five houses. Upon investigation the complaints were confirmed and the flies dealt with by means of liquid insecticides leaving a D.D.T. deposit. In one instance after the lapse of a few days a further inspection was requested, when a "halo" of flies over the whole of the outside roof of the house was to be seen. These flies did not return to the inside of the roof but with the fall of evening took refuge from the cold between the tiles and the roof lining. The outside of the roof as well as the inside was again sprayed with insecticide and the nuisance abated. Specimens of the flies sent to the British Museum resulted in the identification of the fly as the *musca-autumnalis*, which is not a house fly but a field fly, which apparently breeds in manure, etc., and hibernates for the winter in enclosed spaces. In the spring, when the sun is warm, large numbers of these flies revive and for a few days are a serious nuisance in the vicinity of the house in which they hibernated, after which they disappear.

In the Spring of 1948 numerous complaints were received regarding this fly at properties not known to have become infested during the autumn.

These were dealt with in a similar manner to those mentioned above with a view to destroying as many as possible in order to reduce the numbers that might breed to a minimum.

LICENSING OF WORK

The senior sanitary inspector is responsible for the licensing of works to existing buildings unless structural alterations requiring the submission of plans is involved, and during 1947 there were 760 applications involving over £39,000 of works to be dealt with. The licensing of works at existing properties often enables the sanitary inspector to secure the remedy of sanitary defects which may be more urgently required than the works for which the licence is actually applied for.

STAFF

Mr. R. Ostler, clerk in the sanitary inspector's office, was demobilised during the year and was given extended leave of absence from the office to attend a training course for sanitary inspectors under a Government Training Scheme.

CASES OF INFECTIOUS DISEASE IN AGE GROUPS

Disease.	Under 1 year	1 - 2	2 - 3	3 - 4	4 - 5	5 - 10	10 - 15	15 - 20	20 - 35	35 - 45	45 - 65	65 and over	Totals
Scarlet Fever	—	—	—	—	—	1	2	—	—	—	—	—	3
Poliomyelitis	—	1	—	—	—	2	1	3	—	1	—	—	8
Pueraperal Pyrexia ..	—	—	—	—	—	—	—	—	2	—	—	—	2
Ophthalmia Neonatorum	1	—	—	—	—	—	—	—	—	—	—	—	1
Pneumonia	—	—	—	—	—	—	—	—	—	1	—	1	2
Dysentery	—	—	—	—	—	—	—	—	—	1	2	—	3
Measles	5	17	14	20	13	96	11	3	5	—	—	1	185
Whooping Cough ..	1	—	2	1	—	4	1	—	—	—	—	—	9
Scabies	—	—	—	—	—	—	—	—	1	—	—	—	1
Totals ..	7	18	16	21	13	103	15	6	8	3	2	2	214

NOTIFICATIONS OF INFECTIOUS DISEASE

Disease	Total	Admitted to Hospital	Deaths
Scarlet Fever	3	—	—
Whooping Cough	9	—	—
Measles	185	2	—
Poliomyelitis	8	8	2
Pneumonia	2	—	—
Dysentery	3	3	—
Ophthalmia Neonatorum ..	1	—	—
Puerperal Pyrexia	2	2	—
Scabies	1	—	—
Totals	214	15	2

INFECTIOUS DISEASE

Notification Rates per 1,000 of the Population

Notifications	England and Wales	Cuckfield Urban
Typhoid Fever	0.01	—
Paratyphoid Fever	0.01	—
Cerebro-spinal Fever	0.05	—
Scarlet Fever	1.37	0.20
Whooping Cough	2.22	0.59
Diphtheria	0.13	—
Erysipelas	0.19	—
Smallpox	0.00	—
Measles	9.41	12.23
Pneumonia	0.79	0.13

**NOTIFICATIONS OF SCARLET FEVER, MEASLES AND
WHOOPING COUGH, 1940-1947.**

Year	Scarlet Fever	Measles	Whooping Cough
1940 ..	22	102	10
1941 ..	49	55	55
1942 ..	5	104	24
1943 ..	38	196	30
1944 ..	29	62	30
1945 ..	22	61	3
1946 ..	6	25	15
1947 ..	3	185	9
Totals ..	174	790	176

TUBERCULOSIS—NEW CASES AND MORTALITY, 1947.

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Age Periods.	New Cases.				Deaths.			
	Respiratory.		Non-Respiratory.		Respiratory.		Non-Respiratory.	
	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.
0 - 1	-	-	-	-	-	-	-	-
1 - 5	-	-	1	-	-	-	-	-
5 - 15	1	-	-	-	-	-	-	-
15 - 25	-	-	-	-	1	-	-	-
25 - 35	-	1	-	-	-	-	-	-
35 - 45	-	-	-	-	-	-	-	-
45 - 55	1	-	-	1	-	-	-	-
55 - 65	-	1	-	-	-	-	-	-
65 and over	2	-	-	-	1	-	-	-
TOTALS	4	2	1	1	2	-	-	-

TUBERCULOSIS—NEW CASES

Age Periods	1939				1945				1946				1947			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory		Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
0-1 ..	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
1-5 ..	-	1	1	-	-	-	1	-	-	-	-	1	-	-	1	-
5-15..	-	-	1	1	-	-	-	1	-	-	-	-	1	-	-	-
15-25	2	1	-	-	1	-	-	1	4	-	-	2	-	-	-	-
25-35	1	2	-	1	1	3	-	1	-	1	1	1	-	1	-	-
35-45	1	-	-	-	3	-	-	-	-	1	1	-	-	-	-	-
45-55	-	-	-	-	-	-	-	-	2	-	-	-	1	-	-	1
55-65	-	-	-	-	1	-	-	-	2	-	-	-	-	1	-	-
65 and over	-	-	1	-	1	-	-	-	3	-	-	-	2	-	-	-
TOTALS	4	4	3	2	7	3	1	3	11	2	2	4	4	2	1	1

TABLE SHOWING DEATHS FROM TUBERCULOSIS SINCE 1934

Year.	MALES.		FEMALES.	
	Respiratory.	Non-Respiratory.	Respiratory.	Non-Respiratory.
1934	2	—	1	—
1935	6	1	5	—
1936	6	1	3	2
1937	1	—	2	—
1938	3	—	2	—
1939	3	1	2	—
1940	2	—	3	—
1941	2	—	1	2
1942	2	—	1	1
1943	1	—	2	—
1944	3	—	2	—
1945	4	—	1	—
1946	5	—	2	—
1947	2	—	—	—
Totals ..	42	3	27	5

THE MID-SUSSEX ISOLATION HOSPITAL

Appended below are details of cases admitted to Hospital during the year.

Disease.	Cuckfield Rural District	Cuckfield Urban District	Burgess Hill Urban District	East Grinstead Urban District	Uckfield Rural District	Other Districts	Total
Poliomyelitis	11	4	2	1	10	1	29
Polio-encephalitis	—	—	—	—	1	—	1
Observation Poliomyelitis	1	—	—	—	1	—	2
Diphtheria	2	—	—	—	—	8	10
Observation Diphtheria	1	—	—	—	—	1	2
Scarlet Fever	8	—	1	4	8	—	21
Observation Scarlet Fever	1	—	—	—	—	—	1
Measles	6	5	—	8	1	—	20
Measles and Pneumonia	2	—	—	2	2	1	7
Measles and Mastroidectomy	—	—	—	—	—	1	1
Rubella	—	—	—	1	—	—	1
Whooping Cough	—	—	—	1	5	—	6
Erysipelas	1	—	1	1	1	—	4
Chickenpox	—	—	—	—	1	—	1
Chickenpox and Pneumonia	—	1	—	—	—	—	1
Pneumonia	1	—	—	—	—	—	1
Septic Spots	1	—	—	—	—	—	1
Streptococcal Rash and Burns on Arms	—	—	—	1	—	—	1
Streptococcal Rash	—	1	—	—	—	—	1
Tonsillitis	1	—	—	4	2	2	9
Pemphigus	—	—	—	1	—	—	1
Tetanus	—	—	1	—	—	—	1
Vaginitis	—	1	—	—	—	—	1
Observation Typhoid Fever	—	—	—	—	1	—	1
Totals	36	12	5	24	33	14	124

BRIGHTON SANATORIUM

Poliomyelitis	4	4	—	—	—	—	8
Scarlet Fever	—	—	—	—	1	—	1
Measles	—	1	—	—	—	—	1
Measles and Otitis Media	1	—	—	—	—	—	1
Whooping Cough and Bronchial Pneumonia	—	—	—	1	1	—	2
Totals	5	5	—	1	2	—	13